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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/596,066-Conf. #1487
	Filing Date	March 9, 2007
	First Named Inventor	John G. Errington
	Art Unit	1722
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	27806-00001-US1

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 30678

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number: 30678

OR

Firm or
Individual Name: _____

Address: _____

City: _____

Country: _____

State: _____

Zip: _____

Telephone: _____

Email: _____

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(e) is enclosed. (Form PTO/SSE/96)

SIGNATURE of Applicant or Assignee of Record

Signature: 

Name: **JOHN G. ERRINGTON**

Date: **03/09/2007**

Telephone: _____

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of **1** forms are submitted